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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known			
			Application Number 10/799,146			
FEE TRANSMITTAL for FY 2006		Filing	g Date	March 12, 2004		
		Eirat	Named Inventor	Wang, et al.		
Applicant claims small entity status. See 37 CFR 1.27		27			ieon	
		Exai	Examiner Name Monica D. Harrison Art Unit 2813			
TOTAL AMOUNT OF PAYMENT	(\$) 400.00		Art Unit. 2813 Attorney Docket No. APPM/008244/DSM/BCVD/JP			/ ID
	Aitor	ney Docket No.	APPIM/008244	/USIM/BCVD/		
METHOD OF PAYMENT (che	ck all that apply)					
☐ Check ☐ Credit Card ☐	Money Order	None 🔲	Other (please i	identify) :		
Deposit Account Deposit A	.ccount Number: <u>50-10</u>	74/008244	/DSM/BCVD	/JW Deposit Acc	ount Name: <u>A</u>	pplied Materials, Inc
For the above-identified	deposit account, the Dir	ector is hereb	y authorized to:	(check all that app	ply)	
Charge fee(s) ind	icated below		Chai	rge fee(s) indicate	d below, exce	ot for the filing fee
	onal fee(s) or underpayr	ments of fee(s	s) 🛛 Cred	lit any overpayme	nts	
Under 37 CFR 1. WARNING: Information on this form		it card informa	ition should not h	e included on this	form, Provide c	redit card information
and authorization on PTO-2038.	, account pawner even					
FEE CALCULATION						
1. BASIC FILING, SEARCH,			u ccee	EVARAINI A	ATION EEES	
FILIF	NG FEES Small Entity	SEARC	H FEES Small Entit		ATION FEES Small Entity	
Application Type Fee		Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fees Paid (\$)
Utility 300	150	500	250	200	100	
Design 200	100	100	50	130	65	
Plant 200	100	300	150	160	80	
Reissue 300	150	500	250	600	300	
Provisional 200	100	0	0	0	0	
2. EXCESS CLAIM FEES						Small Entity
Fee Description Fe						Fee (\$)
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)					50 200	25 100
Each independent claim over 3 (including Reissues) Multiple dependent claims					360	180
Total Claims Extra Claims Fee(\$)			ee Paid (\$)			Dependent Claims
-20 or HP=	x	. = _			Fee (\$	Fee Paid (\$
HP = highest number of total clair						
	ra Claims Fee(\$	<u>Fe</u>	e Paid (\$)			
3 or HP=	x	_ = _				
HP = highest number of independ	ent claims paid for, if great	er than 3.				
3. APPLICATION SIZE FEE	an avacad 400 -1 -1	n of === - '	ovoludie 1	tropicalle fil-	oauoss =:	omputer
If the specification and drawir listings under 37 CFR						
sheets or fraction ther					inty for coor	: Ladinorial oo
Total Sheets Extra	Sheets Number	of each ad	ditional 50 or	fraction thereo	of Fee (\$)	Fee Paid (\$)
100 = / 50 = (round up to a whole number) x						=
4. OTHER FEE(S)						Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)						
Other (e.g., late filing surcharge) : Petition Fee						400.00
CUDMITTED BY					<u></u>	
SUBMITTED BY	11. 4.1 h	1 11 11.	Registration No.	05.400		740,000,404
Signature	-	nlealif	(Attorney/Agent)	25,436	Telephor	
Name (Print/Type) Robert W	/. Mulcahy				Date	April 3, 2008

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO-THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.